

COMMERCIALPERMIT AFFIDAVIT

Chuck Wooley Building Official

1034 Silver Dr., Ste 103, Greensboro, GA 30642 Telephone - (706) 453-3333 - FAX (706) 453-2579

Name:			Date:	
Construction Address:		Phone Number:		
This permit is for:	New Building	Addition/Renovation	Other:	
Work Description:				
I, the undersigned pr	operty owner, certif	y the following to be true ar	nd accurate:	
have access to the licensed General Cor Initial. I pla construction project Initial. I unbuilding regulations in Initial. I had Georgia State Amentor provide you a person Initial. I undor give advice on homeets the minimum Initial. It is that the project meet inspect the minimum Initial. I unsubcontractors, or made in the project meet inspect the minimum Initial. I undo responsibility as own permits and inspection Initial. I undo responsibility as own permits and inspection Initial. I undo rentitled to worker's	interior of the build ntractor. In on doing and/or I am not purchasing nderstand that as n effect at the time of the accept of the accept. There is a hall copy. It can also derstand that the B w to meet the application building codes. The plans and special suppliers, must be planted that if I conter/builder contractors. The planted that if I conter/builder contractors. The planted that if I conter/builder contractors. The planted that if an accept on a compensation accept on policy, I could interested that if an accept on policy, I could interested that if an accept on policy, I could interested that if an accept on policy, I could interested that if an accept on policy, I could interested that if an accept on policy, I could interested that if an accept on policy, I could interested that it and that if an accept on policy, I could interested that it and that if an accept on policy, I could interested that it and tha	overseeing all construction of this permit for a contractor owner /builder, I must abin of the permit application. I dopted current copy of the copy of the code in this of be found online at www.upuilding Official and department icable building codes, rath official official official official official and department of the project. Owner /builder, any contraust be handled in a civil counter any person or coor to make sure they have the project of the project of the project of the project. Owner /builder any person or coor to make sure they have the project of the p	de by all zoning ordinances and International Building Code and fice for your review, but we cannot	
		Sworn and subscribed before me this		
Date		day of	20	
Applicant Name (Prir	nt)	Signature &	Signature & Seal of Notary Public	
Applicant Signature		Commission	Commission Expires	